

Editorial Department.

AS has been said elsewhere in the present issue of the JOURNAL, it is our purpose henceforth to give more attention than ever to the subject of Insanity. This would be naturally expected, of course, for it is a theme to which the JOURNAL is devoted *ex professo*. It is one of vast public importance, and seems to us to clearly invite discussion at present, and in lending our pages to it, we are unwilling to be misunderstood by any one, as far as our motives are concerned.

One of our chief aims is, and will be, to aid as far as we can, in doing away with the exclusive spirit which has so long pervaded the medical management of asylums for the insane in this country, and which finds its most pronounced expression in the plan of organization and policy of Association of Asylum Superintendents. It is only by the grace or courtesy of the association that any outside member of the profession, however capable or eminent, can meet the responsible medical officers of asylums for the insane, for purposes of discussion. The association cuts itself off almost by specific regulation from free contact with the profession at large. There is no objection to Superintendents of Hospitals for the Insane forming an association of their own as they have done, if any other organization or recognized mode of free intercourse existed between asylum chiefs and other non-official branches of the profession, which would satisfy the felt need of a more perfect intercourse, and of a better knowledge of the actual medical state and internal workings of these hospitals. But no other organization exists for this purpose, and Asylum Superintendents rarely attend State Medical Societies, and as a rule only in small numbers the National Medical Association, in the organization of which a subsection is

provided for medical Psychology, but has thus far proved almost barren of results.

Then again, in nearly all State and municipal asylums in this country, no provisions are made by law, or in fact, for adequate medical visitation and inspection, and the consequence is, that the profession at large is relegated chiefly to the annual "Reports" of their medical officers, as to the inner condition of the asylums. High-minded and capable as many of the superintendents are, and as much as the administration of the asylums in general may be above suspicion, it has come to pass that the present sources of knowledge as to their condition and management are felt to be inadequate, and it is the exclusive spirit still manifested in the presence of a reasonable demand for closer relations with the profession at large, which gives that demand no small portion of its vitality. Insane asylums are simply hospitals for the care and medical treatment of the sick, and the time has now come when very many capable members of the profession, who neither expect nor desire official relations to an asylum, nevertheless take a deep practical interest in the study and treatment of mental diseases, and naturally turn to our public asylums, and inquire as they have the right to do, how they are actually managed in the interests of science and humanity.

If hospitals for the insane were private instead of public institutions, in which the public feel a deep interest, pecuniary and sympathetic; if the inmates of these hospitals, from all ranks in society and from all parts of the country, were in condition mentally to recognize and secure their own rights, as in other hospitals; and if there were no opportunities for abuse of power, or neglect of duty, the case would be different from what it is. There are real difficulties in the case, and the only way out of them, so far as we can see, is for the Asylum Association to enlarge its scope, and show a more liberal and less exclusive spirit toward the outside profession, and to aid in exposing every phase of asylum management to a reasonable and thorough examination. This done, all cause for complaint or suspicion will speedily disappear, and good come, it may be hoped, to the important cause of the best management of the insane.

ATTENTION has recently been called in an open letter by Dr. R. J. Patterson, a well-known asylum superintendent, to some of the evils resulting from the very peculiar laws of the State of Illinois regarding the commitment of the insane. Some years since, largely, we believe, at the instance of a rather celebrated female agitator, the legislature of this State was induced to enact that commitment to an asylum could only take place by a jury trial, thus it was thought, guarding the liberties of the citizen in this as well as in other emergencies by the most time-honored and effectual means. However well this plan may appear in theory, and even in practice, in rural districts, it is shown by Dr. Patterson that it is open to serious objections. Indeed, some of these objections had been very well stated by a committee of a medical society in the city of Chicago which reported on the subject several years ago. Apart from the largely sentimental objection of its publicity, the compulsory jury trial for insanity is objectionable on account of the delay it often causes and the harsh treatment which the patients in many cases necessarily undergo while waiting their trial in ill-fitted county jails or any other improper places of detention. Besides this, a jury made up as it frequently is in large towns, and even containing one physician, is as little likely to give an intelligent or correct verdict in such cases as any equal number of non-expert and merely average intellects can be.

Cases are referred to in Dr. Patterson's letter in which insane persons have been subjected to two or three jury trials before conviction, and that in the face of the clearest evidence of their insanity. Moreover, the decision of the question whether the case shall be brought to trial appears to depend sometimes altogether on the opinion of the county physician, thus putting the whole responsibility upon one person, and that one generally a non-expert as regards insanity. We have in our own experience known of a case of clearly marked insanity kept from trial for months, during which time at least two attempts at suicide and one assault were reported.

The proposition offered by Dr. Patterson, that cases of insanity be examined by a commission of two physicians and one lawyer, appointed by any court of record, and the com-

mittal depend upon their sworn report, with the privilege of a jury trial when demanded by the patient or his friends, seems to us a good one, and the plan infinitely preferable to the awkward and expensive one now in vogue. What constitutional provisions stand in the way we do not know, but it will certainly be a shame if the evils of the present system, of which we have mentioned only a few, of the commitment of the insane in Illinois are allowed to long continue.

As will be seen by a glance at the cover, we have been able to add to the list of Associate Editors, the name of Dr. MEREDITH CLYMER, of New York city. Dr. Clymer has been so long and so favorably known to the profession both at home and abroad, as an author and teacher of rare ability and scholarship, as to make any farther words from ourselves out of place.
